

UNITED STATES DISTRICT COURT
 for the
 District of Minnesota

United States of America

v.

)
) Case No. CR 20-113(1) DSD/BRT
)
)
 Jose A Felan, Jr.
)
)
)
)

Defendant

ARREST WARRANT

To: Any authorized law enforcement officer

YOU ARE COMMANDED to arrest and bring before a United States magistrate judge without unnecessary delay

(name of person to be arrested) Jose A Felan, Jr.,

who is accused of an offense or violation based on the following document filed with the court:

Indictment	<input checked="" type="checkbox"/> Superseding Indictment	Information	Superseding Information	Complaint
Probation Violation Petition	Supervised Release Violation Petition		Violation Notice	Order of the Court

This offense is briefly described as follows:

Count(s) 1, 3, 4 - Arson, 18:844(i)

Date: 07/24/2020



Kim Krulas
Issuing officer's signature

Signature of Clerk or Deputy Clerk

City and state: Minneapolis, MN

Kim Krulas, Deputy Clerk

Printed name and title

Return

This warrant was received on (date) _____, and the person was arrested on (date) _____
 at (city and state) _____.

Date: _____

Arresting officer's signature

Printed name and title

This second page contains personal identifiers provided for law-enforcement use only and therefore should not be filed in court with the executed warrant unless under seal.

(Not for Public Disclosure)

Name of defendant/offender: _____

Known aliases: _____

Last known residence: _____

Prior addresses to which defendant/offender may still have ties: _____

Last known employment: _____

Last known telephone numbers: _____

Place of birth: _____

Date of birth: _____

Social Security number: _____

Height: _____ Weight: _____

Sex: _____ Race: _____

Hair: _____ Eyes: _____

Scars, tattoos, other distinguishing marks: _____

History of violence, weapons, drug use: _____

Known family, friends, and other associates (*name, relation, address, phone number*): _____

FBI number: _____

Complete description of auto: _____

Investigative agency and address: _____

Name and telephone numbers (office and cell) of pretrial services or probation officer (*if applicable*): _____

Date of last contact with pretrial services or probation officer (*if applicable*): _____